## COUNTY OF SAN DIEGO **VOLUNTEER REPORT FORM**

COUNTY OF SAN DIEGO BOARD OF SUPERVISORS

PERIOD: JULY 1, 2003 - JUNE 30, 2004204 JUL 14 PM 4: 09

	DEPARTMENT/			114.		CLERK OF THE BOAR OF SUPERVISORS
	Department/Cour	t:			HHSA	
	Division/Unit:			N. Inlan	d Public	Health
	VOLUNTEER PR	OGRAM BE	NEFITS:			-
a.	GENERAL VOLU intern, groups, co	NTEERS (thi rporations, e	is section tc.)	should incli	ide com	munity volunteer, studen
			F 14.7/E		art de forma	
Cli En	pes of work perforn nic support for imm glish/Spanish Inter ta entry, filing, rece	unizations ar orter	RAL VO	LUNTEERS tuberculosis	in this c infection	ategory:
b.	INSTITUTIONAL	VOLUNTEEF	RS (this s	ection shoul	d include	e court referrals, honor
	camp inmates, Plo	C/RETC, GA	IN, etc.)			
	camp inmates, Pi	Plours	IN, etc.)	an control appears	\$3(F/4(e)	- THE PROPERTY OF THE PROPERTY
(Handrick)	camp impates, Pit	Fours	in, etc.)	Continues debición		Michigan Market properties 5,016 (e. s.
(Handrick)	Veryelances, Pro	Fours	in, etc.)	Continues debición		Michigan Market properties 5,016 (e. s.
Тур	Des of work perform	Hours ed by INSTI	TUTIONA	L VOLUNTI	S/7/19	this category:
Typ	SPECIALIZED VO	Hours  ed by INSTI  LUNTEERS ions requiring, sports figur	TUTIONA  (this sector specific te or celetorsation le	ion should in skills and/ourity). These	ERS in	this category:
Typ	SPECIALIZED VO Volunteers in positions have veri	Hours  ed by INSTI  LUNTEERS ions requiring, sports figur	TUTIONA  (this sector specific te or celetorsation le	ion should in skills and/ourity). These	ERS in	this category:
Typ	SPECIALIZED VO Volunteers in positions have veri	ed by INSTI	(this sector specific e or celel ensation le	ion should in skills and/outly). These evels [VCL]. ompensation	ERS in	this category:  tilization of Special se levels, for example, are lized ave such a volunteer, elow.)

3.

Types of	work perfo	rmed by SPE	ECIALIZ	ED VOLUN	TEERS in th	is categor	y:	
	· · · · ·							
d. TOT	ALS OF DE	PARTMENT	VOLUN	VTEERS (fro	om above):			
No.	of Voluntee	ers	Hou	ırs	Dolla	r Benefit	<del></del>	
	1	<del>- ,</del>	134.	.75	\$2	316		
<del>-</del>	0		0			\$0	_	
<del></del> -	0		0			<u>\$0</u>	_	
and dotatile	renes a come e Substitution partie	Supplemental Folia	i denik		gridag e edage 2003-e et aleadan ba		roggijos pracija P- kiejinijos pracija P- gikieji atvitalija platelij	<b>B</b> Bil.
DONATIO	NS TO VO	LUNTEER F	ROGR	AM:			***************************************	
donations	section.	le/intangible ssign a fair n	тагкет у	alue to each	n and add to	the total v	alue of the	юп,
Item Dona	ted:		<del></del>					
Item Donat	ted:							
Item Donat	ed:				Value:			
							510/1/16/16/16/16/16	
VOLU!	NTEER PR	OGRAM CO	STS:					44444
Cost of	Cost of direct supervision of Volunteers (total hours of direct supervision multiplied by the hourly rate of staff person[s] directly supervising program volunteers.)							
Hours	45	X	Rate	\$26.49		PSUP CONTRACTOR	Carlos Ca	
		oordination (t [s]). This sec iption prepar						rly
Hours		Χı	Rate			18 j. Sir (0)		

U.	Other program costs (training materials/supplies,	recognition costs, etc.):
	Item:	Cost:
	Item:	Cost:
	Item :	Cost:
	TOTAL OF OTHER PROGRAM COSTS =	
d.	TOTAL OF PROGRAM COST (4a+4b+4c) =	
	NET BENEFIT TO DEPARTMENT FROM VOLUN	TEER PROGRAM:
а	Total Dollar Benefits of Volunteers, Item 2d	\$2,316.35
b.	Total of Donations to Volunteer Program, Item 3	\$0.00
c.	Subtract Total of program Costs, Item 4d	\$1,192.05
	TOTAL PROGRAM BENEFIT:	\$1,124.30
	d. a b.	Item:  Item:  Item:  TOTAL OF OTHER PROGRAM COSTS =  d. TOTAL OF PROGRAM COST (4a+4b+4c) =  NET BENEFIT TO DEPARTMENT FROM VOLUN  a Total Dollar Benefits of Volunteers, Item 2d  b. Total of Donations to Volunteer Program, Item 3  c. Subtract Total of program Costs, Item 4d

6							
	Please describe your recruiting programs:  We work with the Escandida Education Communication Commun						
	We work with the Escondido Education Compact, a local organization that provides work exposure for low income high school students,						
	graduation areame high school students,						
7.	SPECIAL VOLUNTEER PROGRAM ACTIVITIES/ACHIEVEMENTS: Please describe any special activities and/or achievements your program was involved in Clinical process improvement efforts toking along No. 1.						
	Clinical process improvement efforts taking place. Volunteer an integral part of process.						
8.	VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2004-05: Please describe your program goals. Include activities, number of volunteers, recruitment, training, recognition and other goals: I would like to have 2 volunteers. One to develop clerical skills and the other clinical support skills. I especially enjoy working with high school students who are exploring potential career goals.						
9.	GENERAL INFORMATION:						
	Name of person completing report:  Diane Hall						
	Phone:(760) 740-8863 _ Mail Stop: N512E-Mail:Diane.Hall@sdcounty.ca.gov						
	Volunteer Coordinator: Diane Hall						
	Phone:Mail Stop:E-Mail:						
10.	DEPARTMENT CERTIFICATION:						
	T/8/04						
	DEPARTMENT HEAD SIGNATURE DATE						